



**Housing Authority of the Town of Portland  
9 Chatham Court, Portland, CT 06480**

Executive Officer  
Allen Harrison

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Board of Commissioners  
Dawn Wadding, Chair  
Susan Malecky, Vice Chair  
Deborah Hallas, Secretary  
Matthew Pegolo, Treasurer  
Jasmin Nunez, Tenant Commissioner

**Resident Transfer Authorization Form**

Resident Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Reason for Transfer: Over-house/ Under-housed / Medical Reason

Explain: \_\_\_\_\_

Family Composition: \_\_\_\_Adults \_\_\_\_Children

<u>Sex</u>	<u>Date of Birth</u>

Transfer to: Project: \_\_\_\_\_

Present # of Bedrooms: \_\_\_\_\_

Tenant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR PHA OFFICE USE ONLY**

**Inspection of Occupied Unit** Date: \_\_\_\_\_

Resident Rent Current:  Yes  No balance? \_\_\_\_\_ Rent Payment History: Good Fair Poor

**INTERIOR: Damage?** Yes or No Approximate Cost of Repairs (If Any): \$ \_\_\_\_\_

If damages, explain: \_\_\_\_\_

Approved  Deny

Executive Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_